



Introduced Version

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**SENATE RESOLUTION No. \_\_\_\_**

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**DIGEST OF INTRODUCED RESOLUTION**

A SENATE RESOLUTION urging the legislative council to assign to the Select Joint Commission on Medicaid Oversight the topic of Medicaid fraud issues.

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**Hershman**

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\_\_\_\_\_, read first time and referred to Committee on

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20122331

2012

SR 2524/DI 84+



## SENATE RESOLUTION

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MADAM PRESIDENT:

I offer the following resolution and move its adoption:

A SENATE RESOLUTION urging the legislative council to assign to the Select Joint Commission on Medicaid Oversight the topic of Medicaid fraud issues.

*Whereas, Medicaid is health insurance for qualifying low-income, needy people, and the eligible recipients include children, the elderly, and persons with disabilities;*

*Whereas, Medicaid fraud results in millions of dollars in lost revenue; and*

*Whereas, The discovery of new, innovative ways to prevent Medicaid fraud will result in better care for Hoosiers and less lost revenue within the system: Therefore,*

*Be it resolved by the Senate of the  
General Assembly of the State of Indiana:*

- 1           SECTION 1. That the legislative council is urged to assign to the  
2           Select Joint Commission on Medicaid Oversight established by  
3           IC 2-5-26-3 the following topics for study during the 2012 legislative  
4           interim:  
5           (1) Analysis of the amendment to the False Claims and  
6           Whistleblower Protection Act (IC 5-11-5.5), which may be  
7           necessary to respond to correspondence received by the United  
8           States Department of Health and Human Services in order to  
9           continue to qualify for financial incentives related to false or  
10          fraudulent claims under the state Medicaid program.  
11          (2) Analysis of appropriate modifications to the subpoena power



1 to promote efficient and timely investigations of alleged  
2 Medicaid fraud offenses, including whether subpoenas may be  
3 issued to require witnesses to answer written interrogatories and  
4 give oral testimony under oath, in addition to provision of  
5 records.  
6 (3) Use of federal matching funds by the Medicaid fraud control  
7 unit for conducting data mining activities and analysis of  
8 appropriate restrictions on data mining.  
9 (4) Consideration of enacting surety bond requirements for  
10 persons seeking to enroll as Medicaid transportation providers  
11 for the first time or persons changing the ownership of an  
12 existing transportation provider.  
13 (5) Designation of Medicaid fraud control unit investigators and  
14 attorneys as special investigators with law enforcement agency  
15 and criminal justice agency status to enhance their ability to  
16 carry out fraud investigation and enforcement responsibilities.

